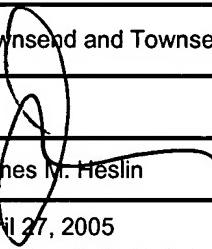
 <small>(to be used for correspondence after initial filing)</small>		Application Number	10/765,380
		Filing Date	January 26, 2004
		First Named Inventor	PERKINS, RODNEY A.
		Art Unit	3736
		Examiner Name	MALLARI, PATRICIA C
Total Number of Pages in This Submission	6	Attorney Docket Number	017534-000740US

ENCLOSURES (Check all that apply)				
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC		
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences		
<input checked="" type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)		
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information		
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter		
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):		
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	<input type="checkbox"/> Return Postcard		
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, Number of CD(s) _____			
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Landscape Table on CD			
<input type="checkbox"/> Reply to Missing Parts/ Incomplete Application				
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53				
<table border="1" style="width: 100%;"> <tr> <td style="width: 10%;">Remarks</td> <td>The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.</td> </tr> </table>			Remarks	The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.
Remarks	The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.			

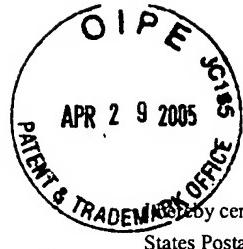
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Townsend and Townsend and Crew LLP		
Signature			
Printed name	James M. Heslin		
Date	April 27, 2005	Reg. No.	29,541

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Signature		
Typed or printed name	JoAnn Evangelista	Date
		April 27, 2005



JFW

by certify that this correspondence is being deposited with the United
States Postal Service as first class mail in an envelope addressed to:

PATENT
Attorney Docket No.: 017534-000740US

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

On April 27, 2005

TOWNSEND and TOWNSEND and CREW LLP

By: *JoAnn Evangelista*
JoAnn Evangelista

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

RODNEY A. PERKINS et al.

Application No.: 10/765,380

Filed: January 26, 2004

For: METHODS, SYSTEMS, AND
KITS FOR LUNG VOLUME
REDUCTION

Customer No.: 20350

Confirmation No. 2521

Examiner: MALLARI, PATRICIA C

Technology Center/Art Unit: 3736

**RESPONSE TO RESTRICTION
REQUIREMENT AND
PRELIMINARY AMENDMENT**

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In response to the Office Action mailed on March 29, 2005, and prior to
examination of the above-referenced application, please enter the following amendments and
remarks:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this
paper.

Remarks/Arguments begin on page 4 of this paper.